

DEPARTMENT OF SOCIAL SERVICES
744 P Street, Sacramento, California 95814



December 15, 1998

ALL COUNTY LETTER NO. 98-93

TO: ALL COUNTY WELFARE DIRECTORS
ALL CHILD WELFARE SERVICES
PROGRAM MANAGERS
ALL COUNTY FISCAL OFFICERS
CHIEF PROBATION OFFICERS

SUBJECT: SUPPORTIVE AND THERAPEUTIC
OPTIONS PROGRAM (STOP)

REFERENCE: CFL 98/99-56 and CFL 98/99-57

REASON FOR THIS
TRANSMITTAL

- ☒ State Law Change
☐ Federal Law or Regulation
Change
☐ Court Order
☐ Clarification Requested by One or
More Counties

The purpose of this letter is to provide the guidelines and instructions necessary for counties to implement the new Supportive and Therapeutic Options Program (STOP). This program will enable counties to expand aftercare options for families with children who are transitioning back to their homes and communities from out-of-home placement and expand options for preventing entry into the foster care system.

This letter is intended to define the scope of services and the target population. It includes information about program requirements that must be met by counties to access these dollars as well as reporting requirements.

The California Department of Social Services' (CDSS) State Fiscal Year 1998/99 Budget provides approximately \$8.9 million in State General Funds to "expand day treatment and aftercare services" to children. Because of the placement of the spending authority in the Budget Act, counties will be required to provide the standard county match. Administrative and case management activities for children through age 18 will continue to be charged to Child Welfare Services. A separate code has been established to cover these costs for children over age 18 who are served through STOP. County allocations and claiming instructions will be issued in separate County Fiscal Letters.

I. Background Information

Some families with children exiting the foster care system or with children at-risk of foster care placement are not Medi-Cal eligible or for other reasons are unable to access needed services under existing funding arrangements. The lack of services and supports needed to successfully keep children at home results in out-of-home placements that are costly both in fiscal and human terms.

Further, when out-of-home placements terminate, services to the child typically end. Although the child's return to the home often creates tremendous stress for the entire family, there is no ability to continue the services that would support successful transitions (in-home family counseling, on-going education and recreational services for the child). Consequently, this transition is not successful for many families and the child is removed again and returned to out-of-home care. This action is both costly and detrimental to the child's well-being.

When Medi-Cal eligibility exists, this funding should be available for services to prevent placement and support the child's return home. The STOP funding is for children who are not Medi-Cal eligible and those for whom services are available but not accessible.

II. Program Goals

- To prevent children from entering or reentering foster care placement through Child Welfare and Probation systems by providing family-centered, community-based supportive and therapeutic services to families.
- To promote successful transitions home and minimize trauma to children and families through the development of aftercare alternatives that provide continuity in service delivery by maintaining already established provider relationships.
- To maximize funding resources for service delivery through collaborative partnerships among local public and private agencies such as mental health, probation, group homes, and others service providers.

III. Service Goals

Service goals include the provision of supportive and therapeutic services to children and families that prevent initial and subsequent out-of-home placements; and facilitate and support successful transitions home and back into the community. It is our goal that counties provide services that are family-centered and community-based. In order to best meet the complex needs of children and their families and to reduce the trauma during the transitioning home period, a key consideration in the development and delivery of aftercare services that provide continuity in service delivery, is maintaining already established provider relationships. Such established/existing relationships may include group home/residential care providers, mental health day treatment providers, and others. STOP services may include, but are not limited to: individual, group and family

counseling; crisis response; educational and recreational services; vocational skills training; and, anger management.

To help children and families meet their service goals, the county will need to identify the specific services needed by children and their families. It is our goal that counties provide family-centered, community-based services. Counties may need to develop and/or expand services where necessary to meet identified needs and ensure their accessibility to families. In addition to expanding the capacity of communities to meet the needs of families, services should assist families in linking with and developing both formal and informal support systems (e.g., Independent Living Program services for target population youth age 16 or older, Family/ Neighborhood Resource Centers for respite care or other center services, and Healthy Families).

IV. Target Population

The target population includes those children/youth (through age 18) and their families who require supportive and therapeutic services to prevent entry or reentry into out-of-home placement through the Child Welfare and Probation systems and who are unable to access such services through existing funding sources. Counties must make every effort to first assure that other funding sources (including, but not limited to, Medi-Cal, Early Periodic Screening Diagnosis and Treatment (EPSDT), Healthy Families, and Probation Challenge Grants) are fully utilized prior to authorizing STOP services. Counties should address any systemic barriers to accessing these programs when designing STOP services. Also, STOP aftercare services may continue to those youth beyond 18 years of age for up to one year.

V. Service Integration Approach

To best meet the complex and multiple needs of children and families, collaborative planning and the integration of service delivery efforts are an effective and beneficial way to help prevent children from entering or reentering foster care and/or promote successful transitions home. Examples of such collaborative effort/service integration to support STOP may include:

- Ongoing coordination with Mental Health to plan and deliver aftercare and placement prevention services and maximize STOP funds.
- Participation with education/schools, residential care providers, health services, and local service providers (community-based agencies) to plan and deliver integrated mental, social, health, educational, recreational and vocational services.
- Continuity of care for children transitioning home through the provision of aftercare services. Where possible, these services should be provided by the facility the child is exiting.
- Agreements (as appropriate per county policy) with service providers that clearly identify program and fiscal responsibilities.

VI. Goals for Maximizing Funding Resources

Counties shall maximize STOP funds by:

- Assuring that these funds do not supplant other sources of funding and are used to cover only those services that would not be funded by any other source or would not be accessible to the family through other sources of funding.
- Collaborating with key stakeholders, such as Mental Health and Probation, on the use of STOP funds in relation to EPSDT funds (Rehabilitation Option under Title XIX) and Board of Correction Challenge Grants.
- Planning for the use of STOP funds by developing a process to determine the child and family's ability to access other available resources/funding sources.
- Utilizing STOP funds primarily for contracted services to meet the child and family's identified needs.

VII. County Agreement

Counties are required to complete and return, by no later than March 1, 1999, the attached County Agreement.

VIII. Report Requirements

By September 30, 1999, and annually thereafter, the counties will submit a report to CDSS that addresses the extent to which each of the above-identified goals (sections ***II. Program Goals, III. Service Goals, V. Service Integration Approach and VI. Goals for Maximizing Funding Resources***) has been met and how improvement in these areas has been measured. The format for this report will be developed by CDSS and disseminated to the counties by January 31, 1999.

If you have any questions, require further clarification or technical assistance please contact your Children's Services Operations consultant at (916) 445-2832.

Sincerely,

Original Signed by Marjorie Kelly on 12/22/98

MARJORIE KELLY
Deputy Director
Children and Family Services Division

cc: California Welfare Directors Association
County Probation Officers of California
California Department of Mental Health

County Agreement
Supportive and Therapeutic Options Program (STOP)
Fiscal Year (FY) 1998/99

_____County hereby agrees to the following goals for the purpose of administering and expending STOP funds. The county will strive to meet, to the extent possible, the objectives and activities addressed under each goal.

GOAL #1: To prevent children from entering or reentering foster care placement through Child Welfare and Probation systems by providing family-centered, community-based supportive and therapeutic services to families. Objectives and activities to best meet this goal include:

- ❑ Assisting children in successfully transitioning home or to the community and prevent these children from reentering the system. Activities may include, but are not limited to:
 - Identifying and developing specific services needed by children and their families through an individualized assessment and based on child and family strengths.
 - Delivering aftercare services that provide for continuity in service delivery by maintaining established provider relationships to the extent possible.
 - Expanding the capacity of local communities to provide additional services required by families.
 - Linking families to community-based services and local service providers and helping them to develop both formal and informal support systems.
- ❑ Preventing children from entering the foster care system. Activities may include, but are not limited to:
 - Identifying and developing specific services needed by children and their families through an individualized assessment.
 - Expanding community capacity to provide services required by families.
 - Linking families to community-based services and local service providers and helping them to develop both formal and informal support systems.

GOAL #2: To promote successful transitions home and minimize trauma to children and families through the development of aftercare alternatives that provide continuity in service delivery. Such efforts may include:

- ❑ Developing/establishing collaborative relationships with key stakeholders such as Mental Health, Probation, Education/Schools, Health Services, and local/community based providers.
 - Ongoing coordination with Mental Health to plan aftercare and placement prevention services in tandem with Probation and Child Welfare and to ensure maximization of STOP funds.
 - Continuity of care for children transitioning home through the provision of aftercare services by the facility the child is exiting, as appropriate for the child/family.

- Establishing agreements with service providers (as appropriate per county policy) that clearly identify program and fiscal responsibilities.

GOAL #3: To maximize funding resources for service delivery through collaborative partnerships among local public and private agencies (mental health, probation, group homes, and other service providers). Objective and activities include:

- Assuring that other sources of funding are used to cover only those services that would not be funded by any other source or would not be accessible to the family through other sources. Activities may include, but are not limited to:
 - Collaborating with key stakeholders, such as Mental Health and Probation, on the use of STOP funds in relation to EPSDT funds (Rehabilitation Option under Title XIX) and Board of Correction Challenge Grants.
 - Planning for the use of STOP funds by developing a process to determine the child and family's accessibility to other available resources/programs.
 - Utilizing STOP funds primarily for the purchase of services that will meet the child and family's identified needs, including, but not limited to, payment for continuation of those services provided by the group home/residential care provider from which the child is exiting.

The County further agrees to submit, in a format prescribed by CDSS, annual reports that address the extent to which the above stated goals have been met and how to improve in these areas. The County also understands that they are required to meet the standard share of cost of 30 percent.

County Welfare Director

Date

Please return to:

Children's Services Operations Bureau
California Department of Social Services
744 P Street, M.S. 19-90
Sacramento, CA 95814

PLEASE RETURN BY NO LATER THAN MARCH 1, 1999